

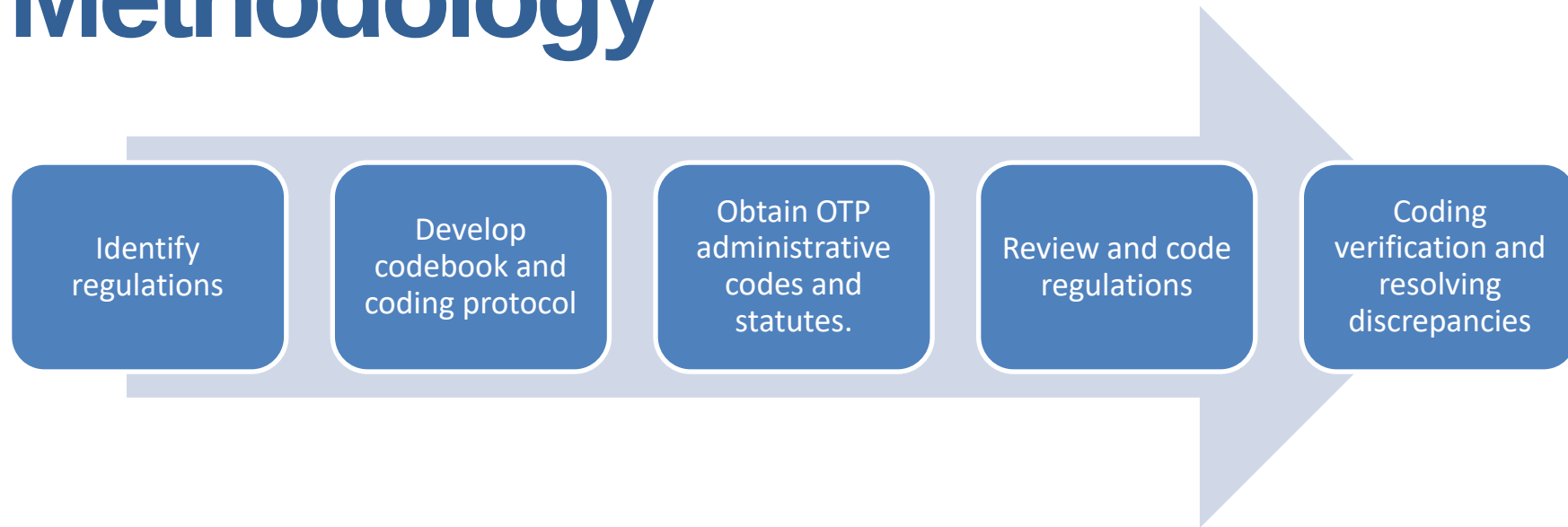
State regulation of opioid treatment programs: Key findings

Methadone Treatment for Opioid Use Disorder: Examining Federal Regulations and Laws - A Workshop
National Academies of Sciences, Engineering, and Medicine
March 3rd, 2022

Disclosures

- I have nothing to disclose

Methodology



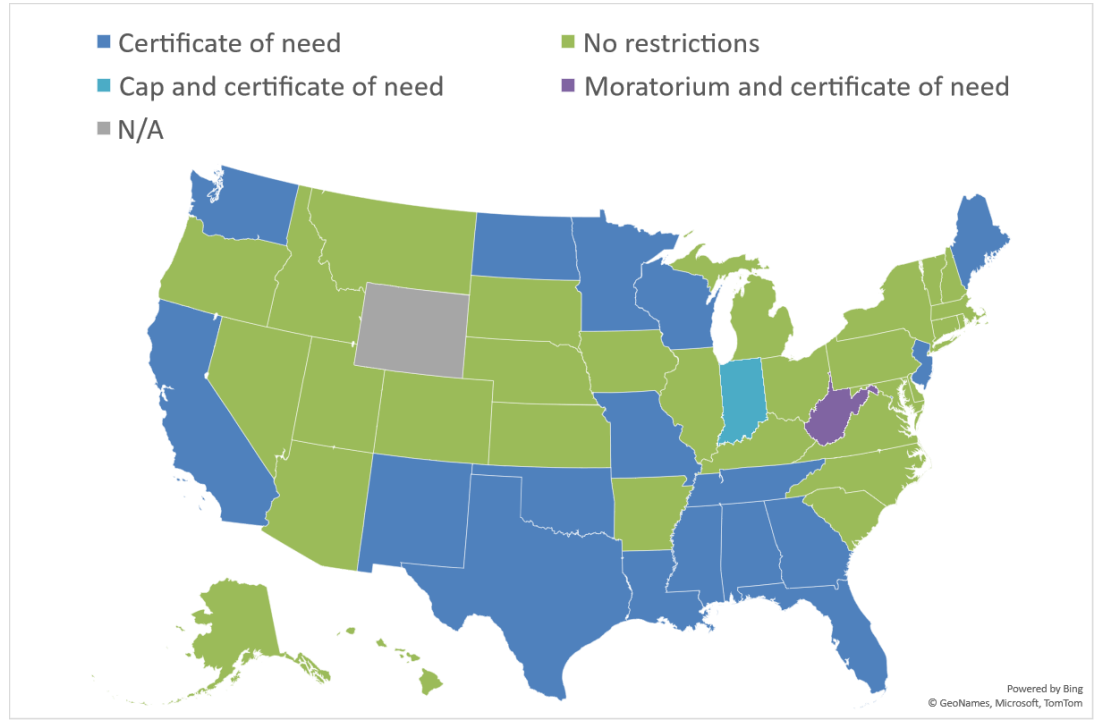
Acknowledgement: Pew is indebted to Joanna Jackson, PhD, MSN, RN, Winthrop University, for her guidance throughout this process. For the research this project builds on, see J.R. Jackson et al., “Characterizing Variability in State-Level Regulations Governing Opioid Treatment Programs,” *Journal of Substance Abuse Treatment* 115 (2020): 108008, <https://doi.org/10.1016/j.jsat.2020.108008>.

Restrictions on new OTPs

Key finding:

20 states restrict the operation of new OTPs in some way

References: P.J. Joudrey, E.J. Edelman, and E.A. Wang, "Drive Times to Opioid Treatment Programs in Urban and Rural Counties in 5 U.S. States," *JAMA* 322, no. 13 (2019): 1310-12, <https://doi.org/10.1001/jama.2019.12562>. B. Connolly, "How Indiana Is Working to Improve Access to Opioid Treatment Programs across the State," The Pew Charitable Trusts, accessed Oct. 19, 2021, <https://www.pewtrusts.org/en/research-and-analysis/articles/2021/07/07/how-indiana-is-working-to-improve-access-to-opioid-treatment-programs-across-the-state>.



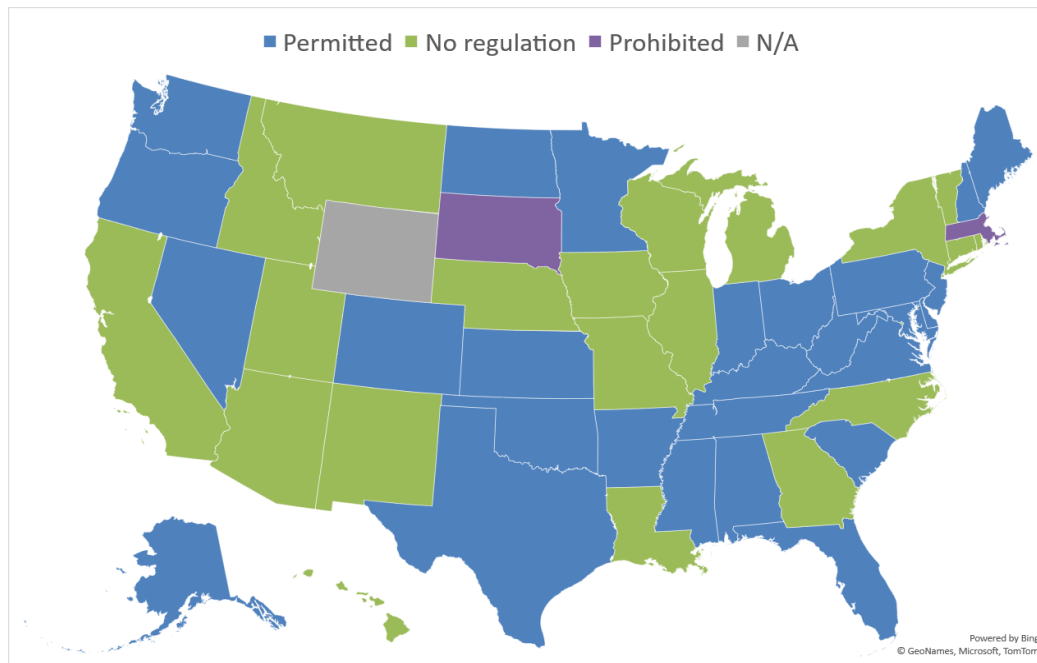
Administrative Discharge

Key findings:

Only 2 states— Massachusetts and South Dakota—prohibit administrative discharge for illicit drug use

References: Substance Abuse and Mental Health Services Administration, “Medications for Opioid Use Disorder: Treatment Improvement Protocol (Tip) Series 63” (2020), https://store.samhsa.gov/sites/default/files/SAMHSA_Digital_Download/PEP20-02-01-006.pdf.

W.L. White et al., “It’s Time to Stop Kicking People out of Addiction Treatment,” *Counselor* 6, no. 2 (2005): 12, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6338434/>.



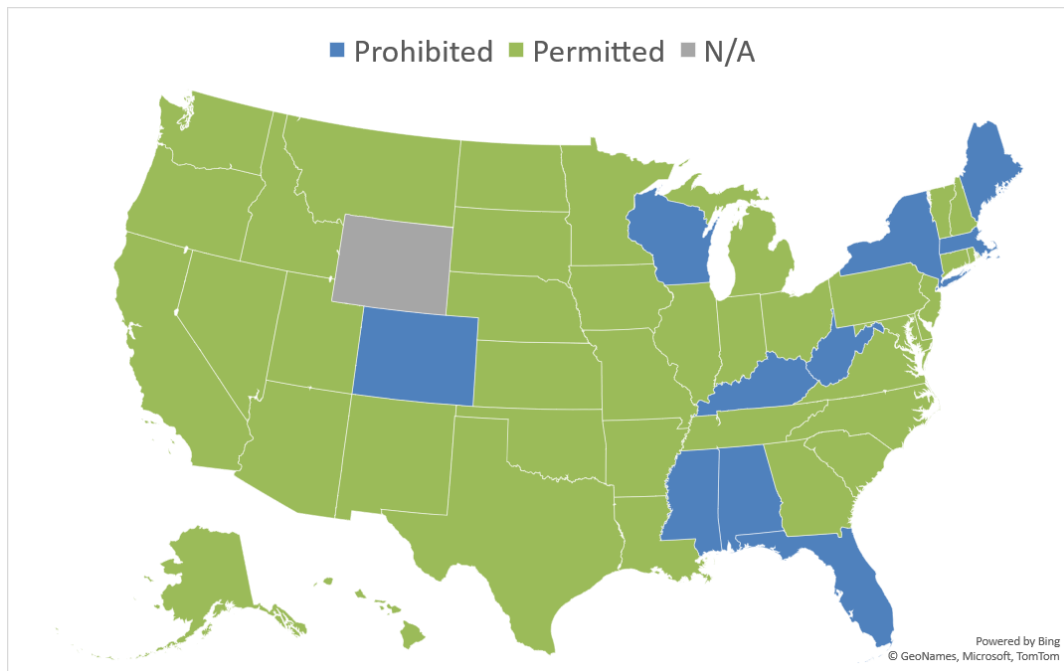
Take-homes – First 30 days

Key finding:

While most states permit take-homes in the first 30 days, 10 states prohibit them

Caveat: Even when permitted by state law, clinic policy may limit patient flexibility.

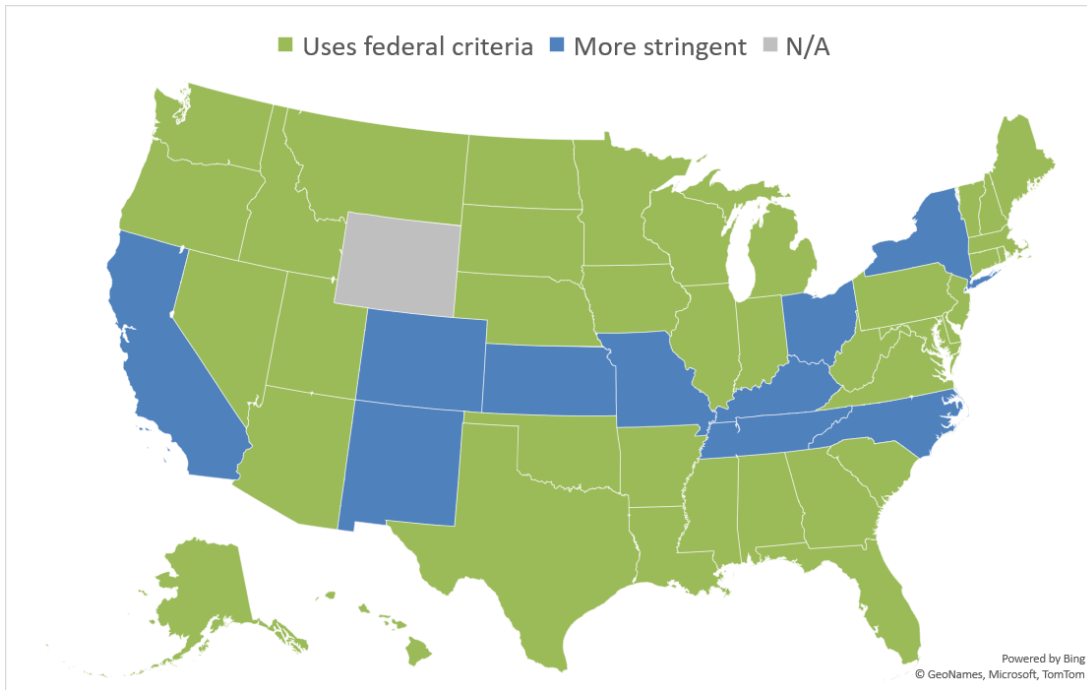
References: M.C. Figgatt et al., “Take-Home Dosing Experiences among Persons Receiving Methadone Maintenance Treatment During COVID-19,” *Journal of Substance Abuse Treatment* 123 (2021), <https://doi.org/10.1016/j.jsat.2021.108276>.



Stability criteria

Key finding:

10 states have take-home stability criteria more stringent than federal rules



Reference: Cal. Code Regs. tit. 9, § 10370

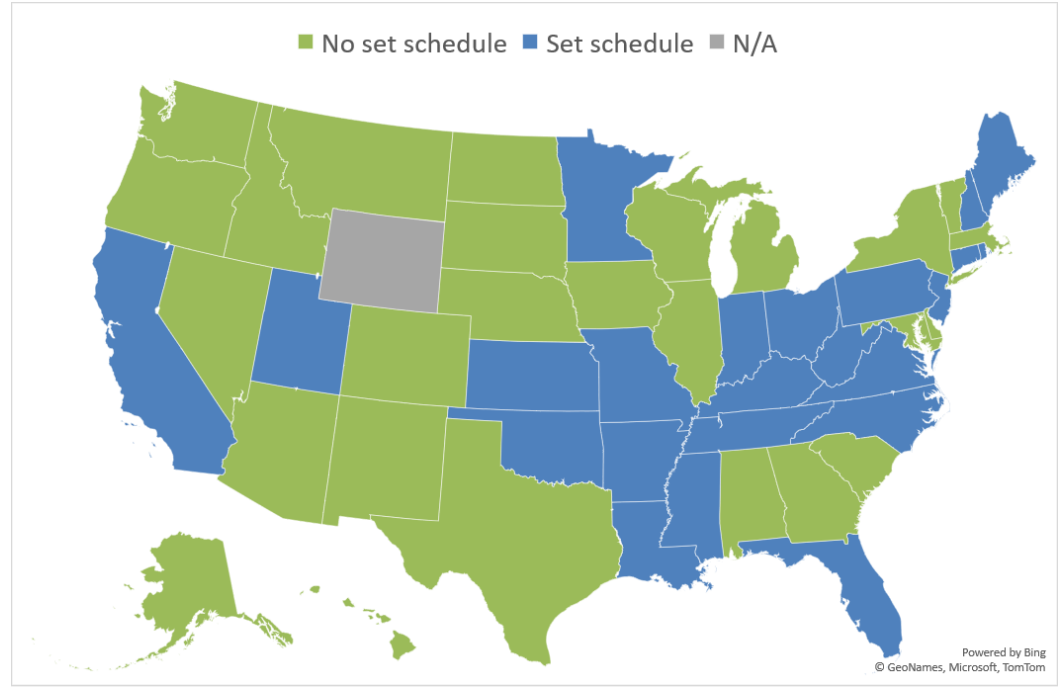
Set counseling schedule

Key finding:

23 states specify a set counseling schedule with a minimum number of sessions

References: M. Hochheimer and G.J. Unick, “Systematic Review and Meta-Analysis of Retention in Treatment Using Medications for Opioid Use Disorder by Medication, Race/Ethnicity, and Gender in the United States,” *Addictive Behaviors* 124 (2022): 107113, <https://www.sciencedirect.com/science/article/pii/S0306460321002987>.

Substance Abuse and Mental Health Services Administration, “Federal Guidelines for Opioid Treatment Programs” (2015), <https://store.samhsa.gov/product/Federal-Guidelines-for-Opioid-Treatment-Programs/PEP15-FEDGUIDEOTP>.



Urine drug screens

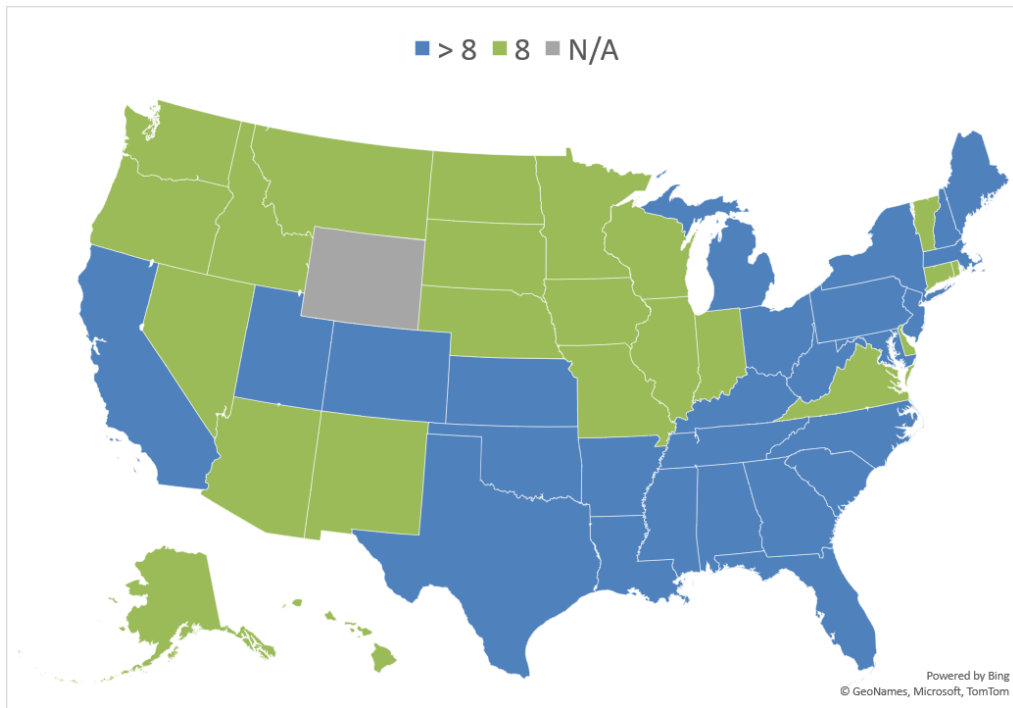
Key finding:

26 states require more than 8 urine drugs screens per year

References: G. Joseph et al., “Reimagining Patient-Centered Care in Opioid Treatment Programs: Lessons from the Bronx During Covid-19,” *Journal of Substance Abuse Treatment* 122 (2021): 108219-19,

<https://pubmed.ncbi.nlm.nih.gov/33353790>.

C. Strike and C. Rufo, “Embarrassing, Degrading, or Beneficial: Patient and Staff Perspectives on Urine Drug Testing in Methadone Maintenance Treatment,” *Journal of Substance Use* 15, no. 5 (2010): 303-12.



Conclusion

- Many states' regulations are not aligned with federal rules
- States could act now to improve care
- Federal reform requires close coordination with states to ensure changes are implemented